U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:
	01/01/2004 Through: 12/31/2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Glen D Johnson	Name Enternational Union of Operating Engineers  Labor Organization File Number 004-588
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2829 Anthony lane so.	Street 2829 Anthony lane So.
City Minneapolis	City Minnespolis
State Minnesota ZIP Code + 4 55-418-3269	State minnesota ZIP Code + 4 SS418-3269
5. Position in labor organization. BUSINESS MANGSEI	
A. Held an interest in, engaged in transactions (including loans) with or	derived income or other appropria har-fit of
monetary value from an employer whose employees your organizati	on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
	And Antimated and Collection Coll
State ZIP Code + 4	Со постоя надажения по про-т от упробления на населения по простоя достоя достоя достоя достоя на простоя на про
Sian	ature
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the second	Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the ction on penalties in the instructions.)
Signed In Nath	on 7-28-05 612-788-9441

Date

Telephone Number

Name of Person Filing Glen D. Johnson	File Number U-
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Wilson Mishane corporation	
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any Suite 500	c. Employer
Street 3001 Metro Drive	
City Bloomington  State Minnesota ZIP Code + 4 55425-1412	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Oferating Engineers H+W Fund	Third Party Administrator
Trade Name, if any:	; ;
P.O. Box, Bldg., Room No., if any Suite 500	
Street 3001 Metro Drive	11.b. Approximate dollar value of such dealing. Un knowen
City Bloomington	12.a. Nature of interest held or income received.
State Minnesota ZIP Code + 4 55425-1412	Golf Green Fees
	August 6th 2004
	and the state of t
	12.b. Amount. 100.60
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Glen D. Johnson		File Number U-
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actionable (2) any part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business ively seeking to represent, or directly to or otherwise.	S
8. Name and address of Business (including trade name, if any).  Name Wilson Mishane Corporation  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 500  Street 3001 Metro Drive  City Blooming ton  State Minnesota ZIP Code +4 55425-1412	9. Business deals with:  a. Labor Organizat  b. Trust  c. Employer	ition
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealir	ng.
Name operating Engineers H+W Fund  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Suite 500	Third p	larty Administrator
Street 3001 Metro Drive	11.b. Approximate dollar value	e of such dealing. Unknowen
City Bloomington	12.a. Nature of interest held	
State Minnesota ZIP Code + 4 55425-1412	601f July 1	Green Fee 9th 2004
	12.b. Amount.	150.00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
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Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filling Glen D. Johnson		File Number <b>U-</b>
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Morgan Stanley Trade Name, if any:	a. Labor Organizat	ion
P.O. Box, Bldg., Room No., if any Suite 201	X b. Trust	
Street 3925 W. 50 1 57.	c. Employer	
State Minnesota ZIP Code + 4 55424-4124		
10. If 9.b. or 9.c. is checked give trust or employer's name.		
	11.a. Nature of such dealin	The second control of
Name Operating Engineers H+W Fund Trade Name, if any:	money	Manager
P.O. Box, Bldg., Room No., if any Suite 500		
Street 3001 Metro Drive		
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State MINALSOTA ZIP Code + 4 55425-1412	12.a. Nature of interest held	
111,1101CS079 211 Code + 4 33-425-1412	Golf C	th 2004
	2019 14	th 2004
	12.b. Amount.	75.00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
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Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		The second secon
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filing Glen D. Johnson	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or	
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City Blooming ton	12.a. Nature of interest held or income received.	To the state of th
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	12.b. Amount.	75.00
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C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).		75.00
13.a. Name and address of Employer or Lahor Relations Consultant	r parts A and B above) or other thing of value.	75.00
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	r parts A and B above) or other thing of value.	75.00
Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name	r parts A and B above) or other thing of value.	75.00
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	r parts A and B above) or other thing of value.	75.00
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	r parts A and B above) or other thing of value.	75.00
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	r parts A and B above) or other thing of value.	75.00
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	r parts A and B above) or other thing of value.	75.00

B. Held an inverse in or derived income or governous benefit when monitary value from a hashbase (1) a substantial part of which consists of beging from solling or lessing or, or characters dealing with the business of an employer vivore amplicynes your labor or apparation represents or is actively secting to represent, or dealing with your labor or generation or when the solling of lessing directly or inferred to the understance of a control of the co	Name of Person Filing Glen D. Johnson	File Number U-	
Name Morgan Stanley Trade Name, if any:  P.O. Box, Bidg., Room No., if any Suite 2e1  Street 3725 N. 5026 St.  City Eding State Minnesofa ZP Code + 4 SS424-41.04  10. If 9.b. or 9.c. is checked give trust or amployer's name.  Name Operating Engineers H+W Fund Trade Name, if any: P.O. Box, Bidg., Room No., if any State Minnesofa ZP Code + 4 SS425-141.2  City Bicaning for  II.b. Approximate dollar value of such dealing.  No ney Manager  II.b. Approximate dollar value of such dealing Unknown  II.b. Approximate dollar value of such dealing  II.b. Approximate dollar value	of an employer whose employees your labor organization represents or is act  (2) any part of which consists of buying from or selling or leasing directly or in	rwise dealing with the business ively seeking to represent, or	
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X b. Trust   X b	Name Morgan Stanley	yes a	
Street 3925 W. 5076 57.  Civ Edina  State Minnesota ZIP Code * 6 55434 4/04  10. If 9.b. or 9.c. is checked give trust or amployer's name.  Name Of 2021/19 Engineers H+W Fund  Trade Name, if any:  PO. 80x Bidg. Room No. if any  Street 3001 Metro Drive  City Bleenington  ZIP Code * 4 55435-1412  City Bleenington  ZIP Code * 4 55435-1412  C. Employer  11.a. Nature of such dealing.  Money Manager  11.b. Approximate dollar value of such dealing.  Unknown  12.a. Nature of interest held or income received.  Golf Green Feel June 9th, 2004  C. Received from any employer (other than an employer covered under parts A and B above) or from any isbor relations consultant to an employer any payment of money or other thing of value.  13.a. Name and address of Employer of Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  PO. 80x, Bidg., Room No., if any  Street  City  State  ZIP Code * 4   14.b. Amount of payment.	Trade Name, if any:		
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State Minnesota ZIP Code *4 \$5424-404  10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Operating Engineers H+W Fund Trade Name, If any:  P.O. Box, Bldg. Room No., if any  ZIP Code *4 \$5425-1412  CIV Bicening fon  ZIP Code *4 \$5425-1412  C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.  13.e. Nature of payment.  14.a. Nature of payment.  14.b. Amount of payment.  14.b. Amount of payment.	Street 3925 W. 50世 57.	c. Employer	
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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4  14.b. Amount of payment.	C. Received from any employer (other than an employer covered unde	A god Dokum	
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City State ZIP Code + 4  13.b le the Rusiness 5. b. 14.b. Amount of payment.	P.O. Box, Bldg., Room No., if any		:
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13 b le the Dusing State	City .		
13.b. Is the Business an Employer or Consultant ?	State ZIP Code + 4		
	13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filling Glen D. Johnson	
B. Held an interest in or derived income or economic benefit with monetary v substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actually any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organication.	erwise dealing with the business tively seeking to represent, or
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	11.a. Nature of such dealing.
City State ZIP Code + 4	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer covered under	12.b. Amount.
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name Asseciated General Centractors  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 110	Property A and B above) or other thing of value.  14.a. Nature of payment.  Dinner  February 25th 2004
Street 525 Park ST.  City ST. PAUL  State Minnesota ZIP Code + 4 55/03-2186	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer  11.a. Nature of such dealing.
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.
	12.b. Amount.
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name Jensen, Bell, Converse + Enickson, P.A.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1500 Wells Fange Place 30 E, 7th St.  City ST. Pav2  State Minnesota ZIP Code + 4 55101-4914	14.a. Nature of payment.  GOLF - Green Fee's  MAY 14th 2004
13.b. Is the Business an Employer X or Consultant?	14.b. Amount of payment.

72.00

or Consultant

100.00